

# Work Order ID 113856

February-24-14 10:05:11 AM

**\*113856\***

Page 1

Item ID: 646.3001

Accept

**\*N900040100\***

Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: Lower Cutter Assy

Start Date: 2/24/14 Start Qty: 5.00 **\*5\***

Cust Item ID:

Required Date: 2/24/14 Req'd Qty: 5.00 **\*5\***

Customer:

Reference:

Approvals: Process Plan: MC5 Date: 14-02-26

Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***

QC: \_\_\_\_\_ Date: \_\_\_\_\_

SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop **\*NR2\***

Sequence ID/  
Work Center ID

Operation  
Description

Set Up/  
Run Hours

Tool ID

Tool #

Plan  
Code

Accept  
Qty

Reject  
Qty

Reject  
Number

Insp.  
Stamp

Draw Nbr

Revision Nbr

646.3000

N/C

110

Pick Kit

0.00

**\*110\***

Packaging

Memo

0.00

Packaging

5

14-02-27

120

0.00

**\*120\***

Small Fab

Memo

0.00

Small Fab

Assemble as per dwg and apply loctite 598 on all faying surfaces shown on dwg per note 7.

A/R RTV LOCTITE 598: 125306  
exp. date: 14/04/16

5

14-02-28

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order update only ☐

Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width: 100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>															
Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>															
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Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other  _____ _____ _____
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# Work Order ID 113856

February-24-14 10:05:11 AM

**\*113856\***

Page 2

Item ID: 646.3001

Accept

**\*N900040100\***

Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: Lower Cutter Assy

Start Date: 2/24/14 Start Qty: 5.00 **\*5\***

Cust Item ID:

Required Date: 2/24/14 Req'd Qty: 5.00 **\*5\***

Customer:

Reference:

Approvals: Process Plan: \_\_\_\_\_ Date: \_\_\_\_\_

Tooling: \_\_\_\_\_ Date: \_\_\_\_\_

Run Start **\*NR1\***

QC: \_\_\_\_\_ Date: \_\_\_\_\_

SPC (Y/N): \_\_\_\_\_ Date: \_\_\_\_\_

Stop **\*NR2\***

Sequence ID/  
Work Center ID

Operation  
Description

Set Up/  
Run Hours

Tool ID

Tool #

Plan  
Code

Accept  
Qty

Reject  
Qty

Reject  
Number

Insp.  
Stamp

130

QC5- Inspect part completeness to step on W/O

0.00

DAS

27

9-89

**\*130\***

QC

Memo

Quality Control

0.00

140

Identify as per dwg & Stock Location: 81427

0.00

**\*140\***

Packaging

Memo

Packaging

\*\*\*IDENTIFY AS PER APICAL MPP-120 BY STAMPING THE P# AND  
REV\*\*\*

0.00

150

QC21- Final Inspection - Work Order Release

0.00

**\*150\***

QC

Memo

Quality Control

0.00

S

5x

14-3-10

14-03-17

14-03-14

DAS  
26  
9-89

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

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Supplier									
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### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence  <input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other  _____ _____ _____
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# Picklist Print

February-24-14 10:05:11 AM

Page 1

Work Order ID: 113856

**\*113856\***

Parent Item: 646.3001

**\*646 3001\***

Parent Item Name: Lower Cutter Assy

Start Date: 2/24/14

Required Date: 2/24/14

Start Qty: 5.00

Required Qty: 5.00

Comments: IPP REV:A 12.10.19 NEW ISSUE DD VERF:JLM

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
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MS21042L08

Purchased

No

Each

3,505.000

50

**\*MS21042I 08\***

**\*\***

*mlw 14.02.27*

Nut

Location

Loc Qty

Loc Code

ST314

58

125445

123900

58

ST508

3328

125445

1828

m127410

1500

ST509

119

m127304

119

646.3010

Manufactured

No

110

Each

13.0000

1

5

**\*646 3010\***

**\*\***

*mlw 14.02.27*

LH Half

Location

Loc Qty

Loc Code

CA

13

108521

108521

12

99832

1

646.3011

Manufactured

No

110

Each

9.0000

1

5

**\*646 3011\***

**\*\***

*mlw 14.02.27*

RH Half

Location

Loc Qty

Loc Code

CA

9

99787x4

107677x1

4

99787x4

5

107677x1

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

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Work Order: _____  Part No. _____  NCR No. _____	<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Suspected Unapproved <input type="checkbox"/>	<b>AGAINST DEPARTMENT/PROCESS</b>  <table style="width:100%;"> <tr> <td>Skid-tube <input type="checkbox"/></td> <td>Crosstube <input type="checkbox"/></td> <td>Water Jet <input type="checkbox"/></td> <td>Engineering <input type="checkbox"/></td> </tr> <tr> <td>Machining <input type="checkbox"/></td> <td>Small Fab <input type="checkbox"/></td> <td>Prod. Eng. Coord. <input type="checkbox"/></td> <td>Quality <input type="checkbox"/></td> </tr> <tr> <td>Thermoforming <input type="checkbox"/></td> <td>Finishing <input type="checkbox"/></td> <td>Rec/Store/Packaging <input type="checkbox"/></td> <td>Other <input type="checkbox"/></td> </tr> <tr> <td>Large Fab <input type="checkbox"/></td> <td>Composite <input type="checkbox"/></td> <td>Supplier <input type="checkbox"/></td> <td></td> </tr> </table>	Skid-tube <input type="checkbox"/>	Crosstube <input type="checkbox"/>	Water Jet <input type="checkbox"/>	Engineering <input type="checkbox"/>	Machining <input type="checkbox"/>	Small Fab <input type="checkbox"/>	Prod. Eng. Coord. <input type="checkbox"/>	Quality <input type="checkbox"/>	Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>	Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>	
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Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence
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<input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other		

# Picklist Print

February-24-14 10:05:11 AM

Page 2

Work Order ID: 113856

**\*113856\***

Parent Item: 646.3001

**\*646 3001\***

Parent Item Name: Lower Cutter Assy

Start Date: 2/24/14

Required Date: 2/24/14

Start Qty: 5.00

Required Qty: 5.00

646.3012

Manufactured No

110

Each

15.0000

1

5

**\*646 3012\***

Lower Guide

**\*\***

mlw 14.02.27

Location

Loc Qty

Loc Code

CA

15

102843

3

108193

6

96712

1

97092

5

97092

646.3013

Manufactured No

110

Each

15.0000

1

5

**\*646 3013\***

Blade

**\*\***

mlw 14.02.27

Location

Loc Qty

Loc Code

CA

15

102802

5

106687

4

108183

6

106687

646.3014

Manufactured No

110

Each

11.0000

1

5

**\*646 3014\***

Blade

**\*\***

mlw 14.02.27

Location

Loc Qty

Loc Code

CA

11

102901 x4

5

107626 x1

6

102901x4  
107626x1

February-24-14 10:05:11 AM

Shop Packet Print

Page 2

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

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Supplier											
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Unapproved											

FAULT CATEGORY							
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube		<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function		<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence		<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other	



# Picklist Print

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Page 3

Work Order ID: 113856

**\*113856\***

Parent Item: 646.3001

**\*646.3001\***

Parent Item Name: Lower Cutter Assy

Start Date: 2/24/14

Required Date: 2/24/14

Start Qty: 5.00

Required Qty: 5.00

646.3015 Manufactured No

110 Each 46.0000 1 5

**\*646.3015\***

Blade

**\*\***

m/m 14.02.27

## Location

## Loc Qty

## Loc Code

CA

46

107339

21

107664

10

92893 x2

2

93344 x3

13

92893x2  
93344x3

MS27039-08-19

Purchased No

110 Each 2,781.000 19 95

**\*MS27039-08-19\***

Screw

**\*\***

m/m 14.02.27

## Location

## Loc Qty

## Loc Code

ST506

2781

124309

1171

125654

127

m127410

400

m127831

83

m127904

1000

127410

NAS1149FN832P

Purchased No

110 Each 10,495.00 38 190

**\*NAS1149FN832P\***

Washer

**\*\***

m/m 14.02.27

## Location

## Loc Qty

## Loc Code

ST295

495

123522

400

123900

95

st510

10000

125268

10000

123900

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Shop Packet Print

Page 3

DQA: \_\_\_\_\_ Date: \_\_\_\_\_



## WORK ORDER NON-CONFORMANCE / UPDATE

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Thermoforming <input type="checkbox"/>	Finishing <input type="checkbox"/>	Rec/Store/Packaging <input type="checkbox"/>	Other <input type="checkbox"/>															
Large Fab <input type="checkbox"/>	Composite <input type="checkbox"/>	Supplier <input type="checkbox"/>																

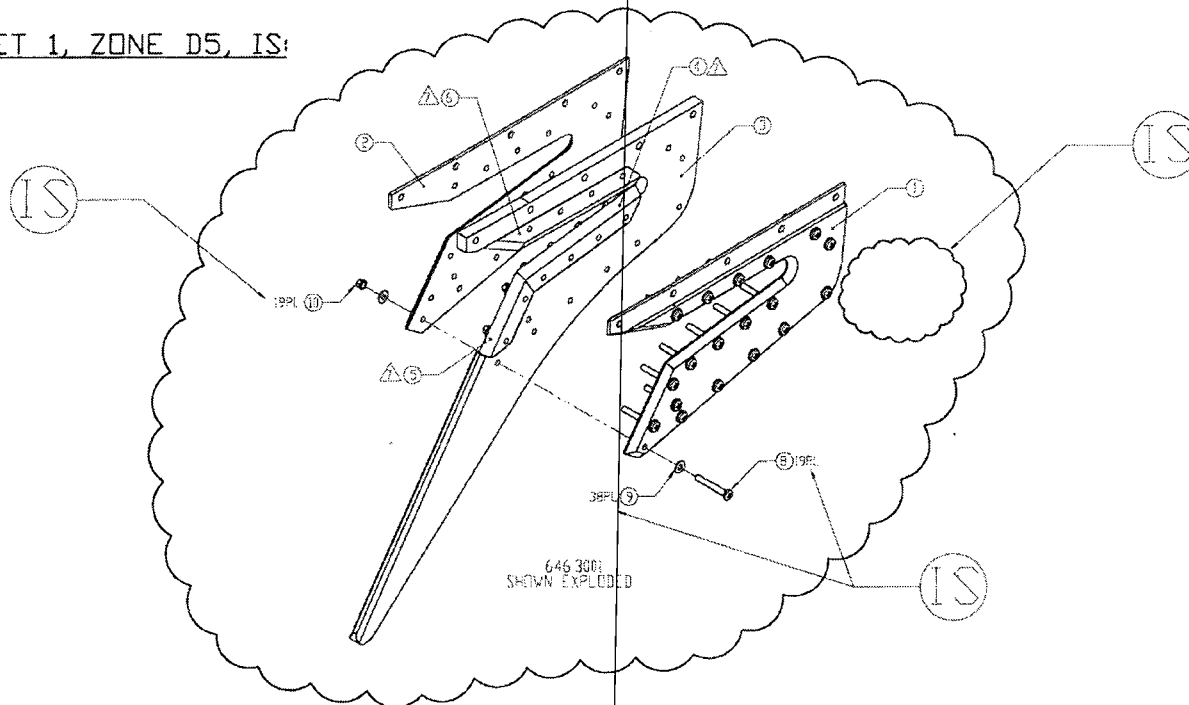
Root Cause	Date	Step	Qty	Description of work order update or non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector
Design									
Doc/Data									
Equip/Tooling									
Handling/Pre									
Material									
Operator									
Offset/Setup									
Process									
Supplier									
Training									
Transport									
Unapproved									

### FAULT CATEGORY

<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric <input type="checkbox"/> Cracks <input type="checkbox"/> Crimp/Kink/Ripple/Wave <input type="checkbox"/> Cuffs <input type="checkbox"/> Crushing <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Marks/Chatter <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damage/Defect <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drawing <input type="checkbox"/> Drill Holes <input type="checkbox"/> Finish <input type="checkbox"/> Fit/Function	<input type="checkbox"/> Folio/Program <input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete/Unqualified <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Misaligned/off center <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Off-set <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence	<input type="checkbox"/> Outside Dimensions <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Set-up <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled <input type="checkbox"/> Other  _____ _____ _____
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APICAL INDUSTRIES, INC.	ENGINEERING CHANGE NOTICE NO. 02195		SHEET 1 OF 4	
	DWG NO. 646.3000	REV: N/C	PREPARED BY S. HUFF	DATE: 01/05/09
	EFFECT ON DWG <input type="checkbox"/> INC. <input checked="" type="checkbox"/> UNINC.			
DWG TITLE: LOWER CUTTER ASSY				
APPROVED BY: ENGR <i>[Signature]</i>	MFG <i>[Signature]</i>	QC <i>[Signature]</i>	EFF: NEXT ORDER	
TRANSACTION CODES (TC): A-ADD C-CREATE R-REVISE D-DELETE	REASON: REMOVED RIVETS IN FAVOR OF ADDITIONAL SCREWS			

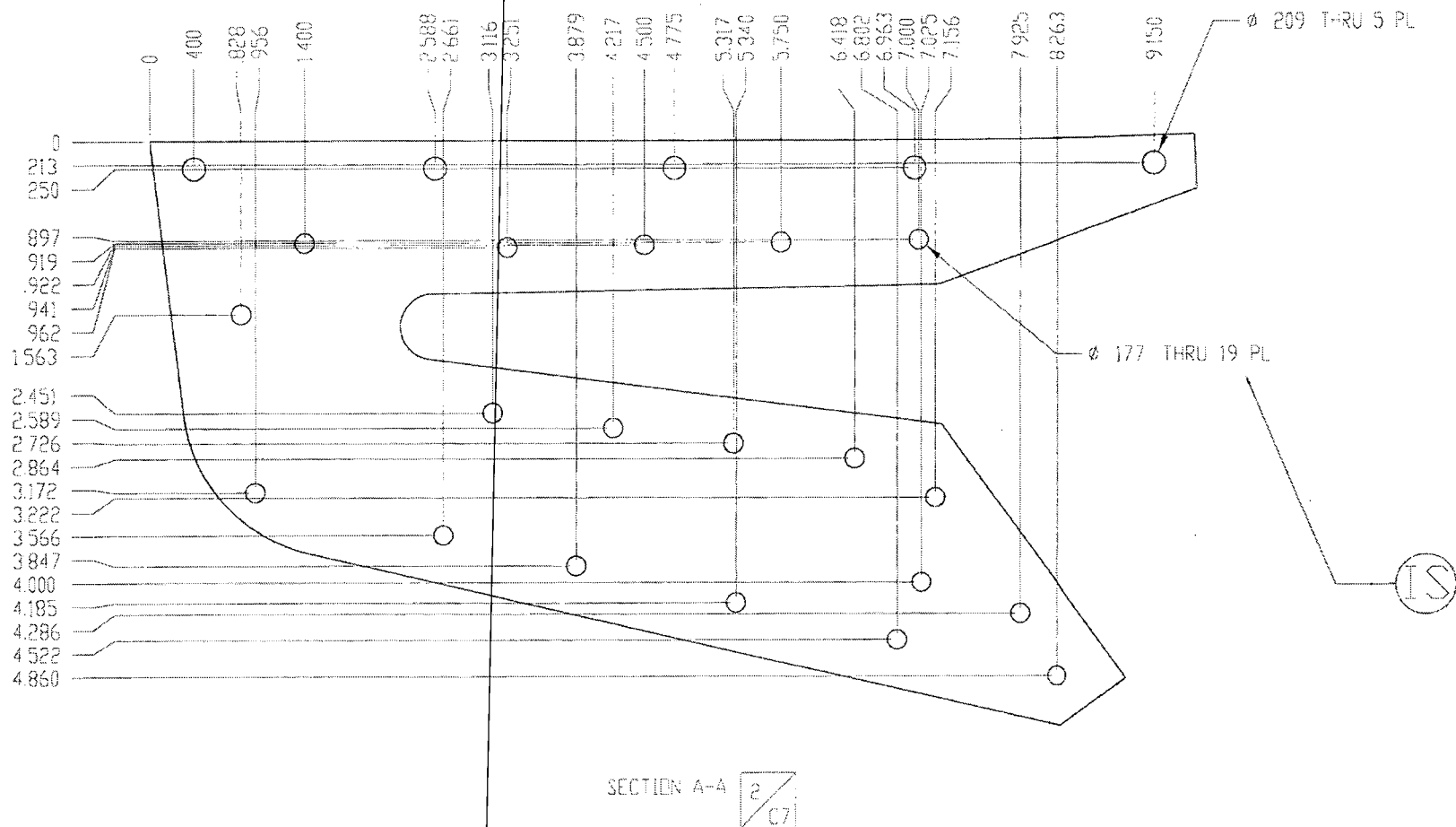
SHEET 1, ZONE D5, IS:



113856.MCJ  
14-02-26

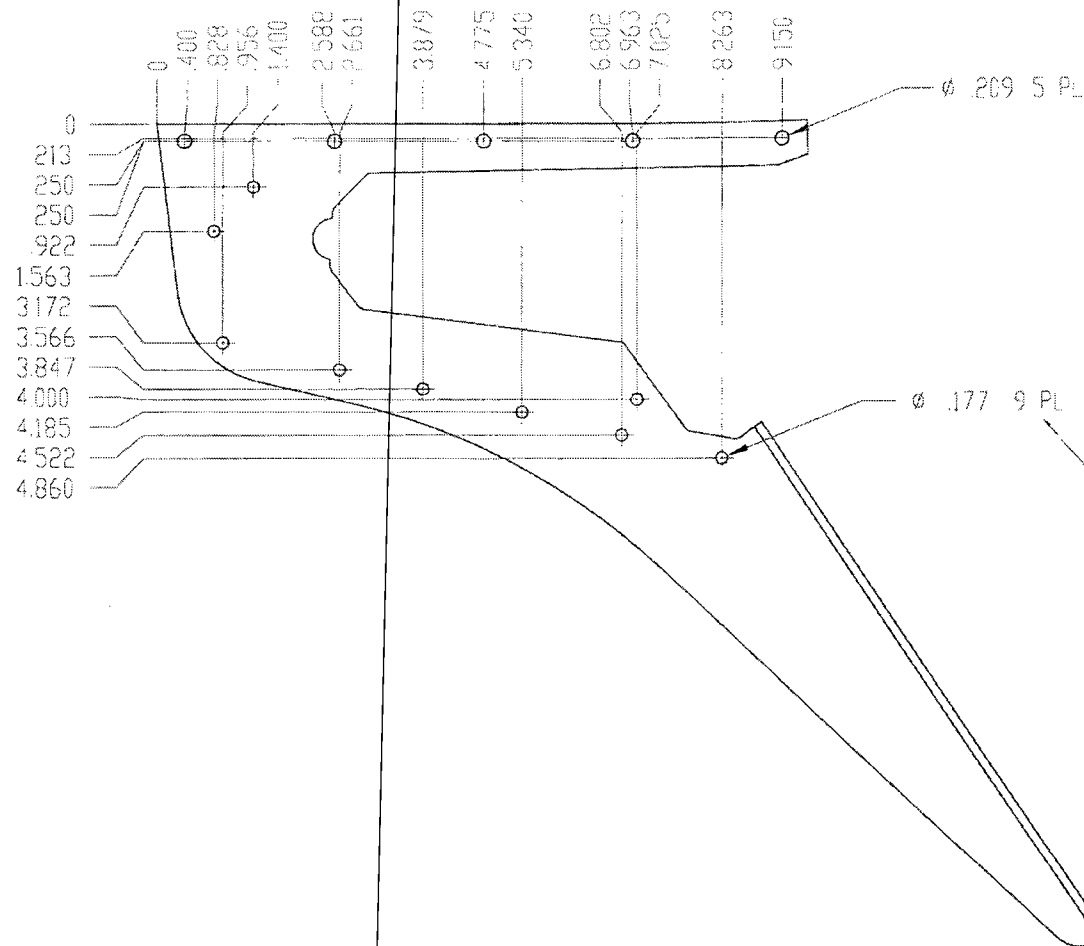
10	R	601.1541	19	LOCKNUT	MS21042L08
9	R	601.2764	38	WASHER	NAS1149FN832P
8	R	601.2765	19	SCREW	MS27039-0819
7	D	601.2766	2	RIVET	MS20470AD5-18
			.3001		
F/N	TC	PART NUMBER	QTY	DESCRIPTION	MATERIAL/SPECIFICATION
DOCUMENTS EFFECTED:					CHANGE CATEGORY
<input type="checkbox"/> MDL <input checked="" type="checkbox"/> INSTALL INSTRU <input checked="" type="checkbox"/> ICA <input type="checkbox"/> FMS <input checked="" type="checkbox"/> BOM					DER REVIEW REQUIRED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO
					<input type="checkbox"/> MAJOR <input checked="" type="checkbox"/> MINOR

SHEET 3 IS:



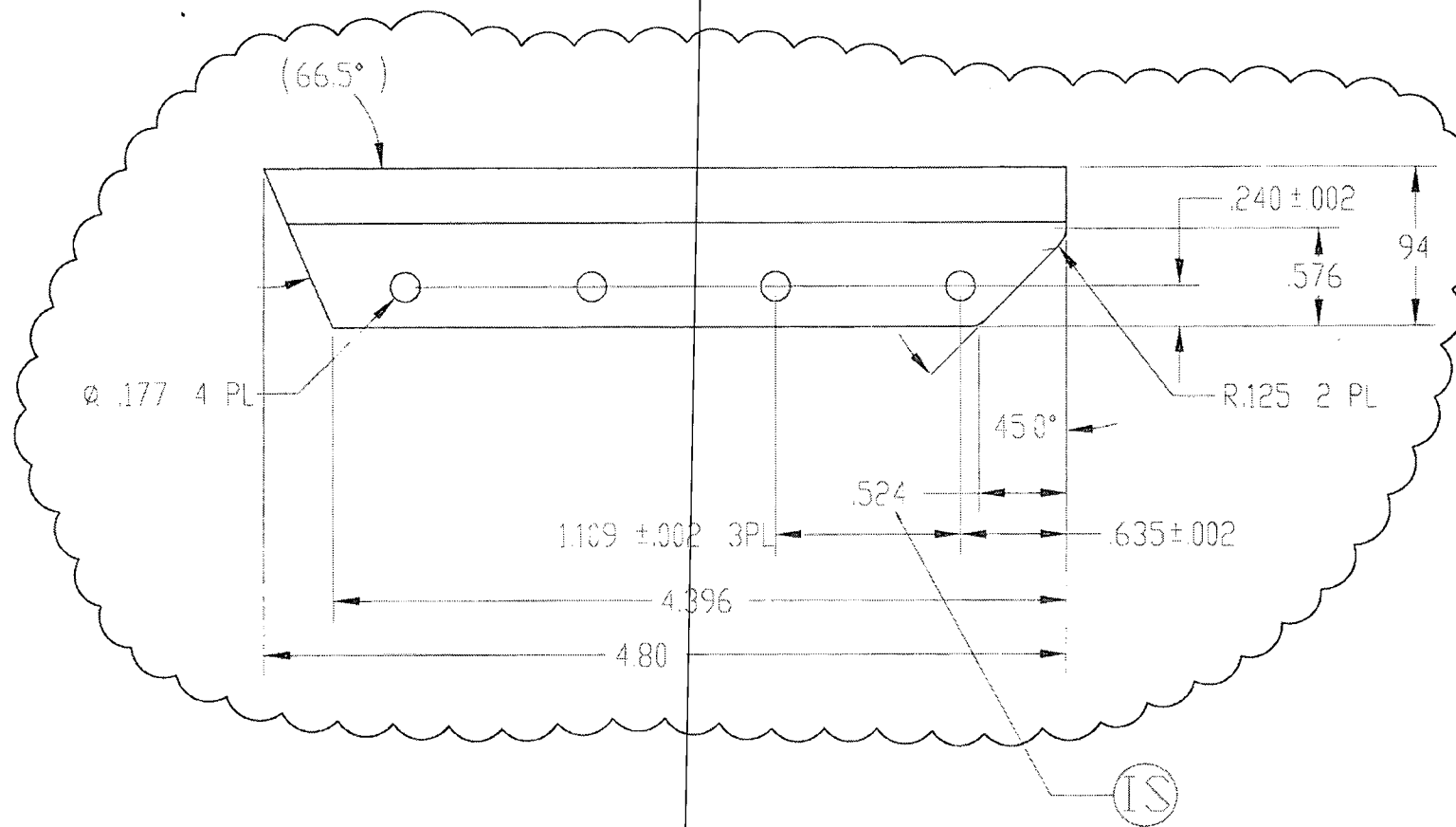
F/N	TC	PART NUMBER	QTY	DESCRIPTION	MATERIAL/SPECIFICATION

SHEET 5 IS:



F/N	TC	PART NUMBER	QTY	DESCRIPTION	MATERIAL/SPECIFICATION

SHEET 6, ZONE C4, IS:



F/N	TC	PART NUMBER	QTY	DESCRIPTION	MATERIAL/SPECIFICATION

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# NOTES:

- 1 MATERIAL: ALUMINUM 7075-T651 PER AMS QQ-A-250/12
- 2 FINISH: HARD ANODIZE IAW MIL-A-8625 TYPE III, CLASS 2, COLOR BLACK;  
CARDINAL 4860-50 PRETREATMENT PRIMER  
PRIME IAW MIL-P-23377J TYPE I CLASS N
- 3 MATERIAL: AISI A2 TOOL STEEL  
CONDITION: ANNEALED  
POST PROCESS: HEAT TREAT TO 58-62 Rc ROCKWELL HARDNESS
- 4 FINISH: PRIME IAW MIL-P-23377J TYPE I CLASS N
- 5 DEBURR AND BREAK ALL SHARP EDGES EXCEPT WHERE OTHERWISE NOTED
- 6 IDENTIFY IAW MPP-120
- 7 APPLY F/N 11 AS REQUIRED TO ALL FAYING SURFACES OF F/N 4, 5 & 6 UPON ASSEMBLY
- 8 CUTTING EDGE INTENDED TO BE SHARP, DO NOT BREAK SHARP EDGE

17PL (10)

7 (5)

7 (6)

4 (7)

3

1

7 (2PL)

8 (17PL)

34PL (9)

646.3001  
SHOWN EXPLODED

UNINCORPORATED ECN(s)

02195

QTY	REV	DATE	DESCRIPTION	MAT'L	SPEC.
17	10	601.1868	LOCKNUT		
34	9	601.2764	WASHER	HALF INCH DIA	
17	8	601.2765	SCREW	1/4 INCH DIA	
2	7	601.2766	RIVET	1/4 INCH DIA	
1	6	646.3015	BLADE		
1	5	646.3014	BLADE		
1	4	646.3013	BLADE		
1	3	646.3012	LOWER GUIDE		
1	2	646.3011	RH HALF		
1	1	646.3010	LH HALF		
1		646.3001	LOWER CUTTER ASSY		
QTY	REV	DATE	DESCRIPTION	MAT'L	SPEC.
1	11	601.2045	RTV, LOCTITE 598		
1	10	601.1868	LOCKNUT		
1	9	601.2764	WASHER		
1	8	601.2765	SCREW		
1	7	601.2766	RIVET		
1	6	646.3015	BLADE		
1	5	646.3014	BLADE		
1	4	646.3013	BLADE		
1	3	646.3012	LOWER GUIDE		
1	2	646.3011	RH HALF		
1	1	646.3010	LH HALF		
1		646.3001	LOWER CUTTER ASSY		

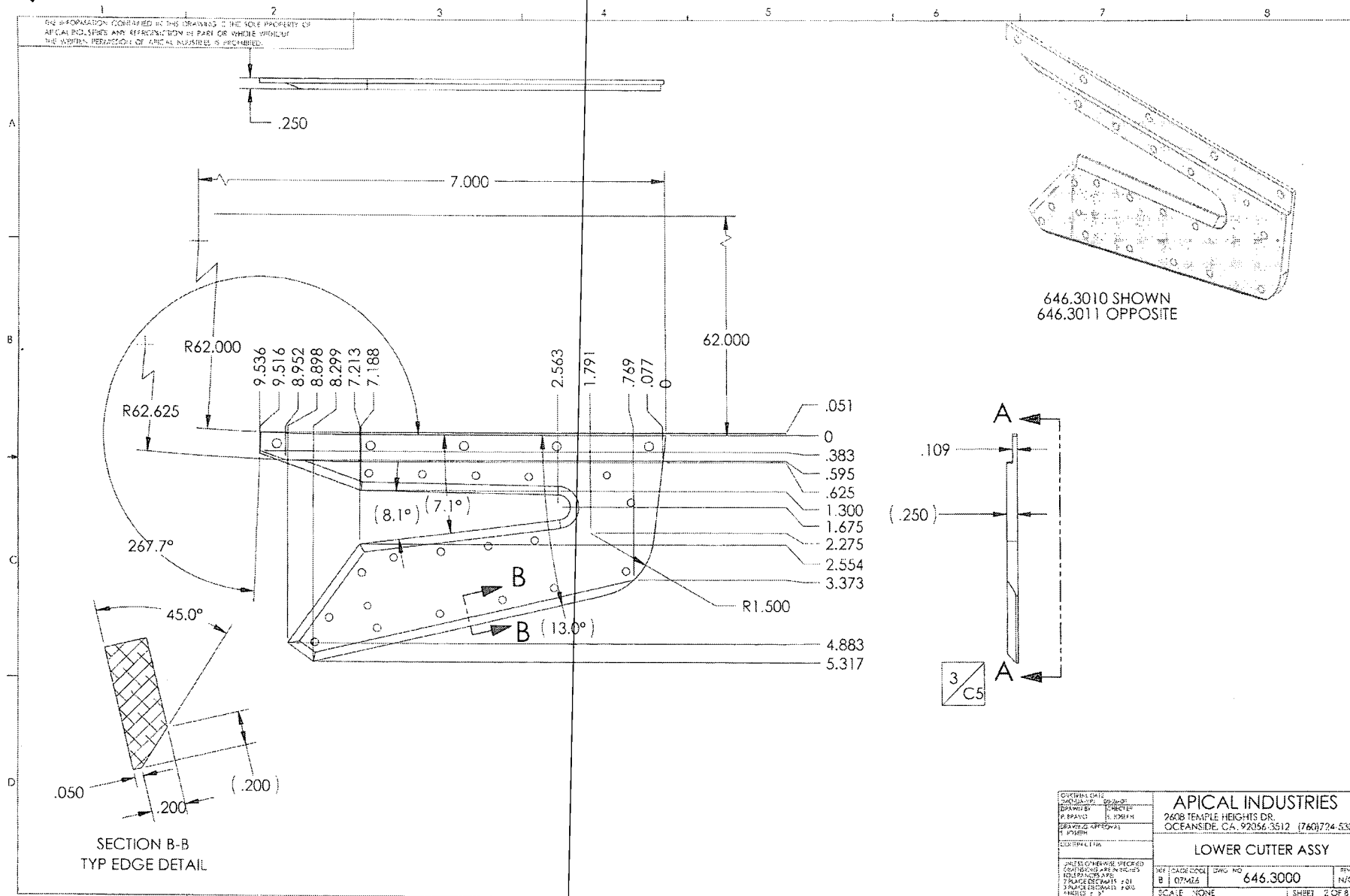
NEXT ASSY (S)		646.4000	
ORIGINAL DATE		10-28-98	
REVISED DATE		11-20-98	
BY		J. JONES	
CHECKED		J. JONES	
APPROVED		J. JONES	
DATE		11-20-98	
SCALE		1:1	
SHEET		1 OF 8	

APICAL INDUSTRIES  
2608 TEMPLE HEIGHTS DR.  
OCEANSIDE, CA. 92056-3512 1760/724-5300

LOWER CUTTER ASSY

646.3000

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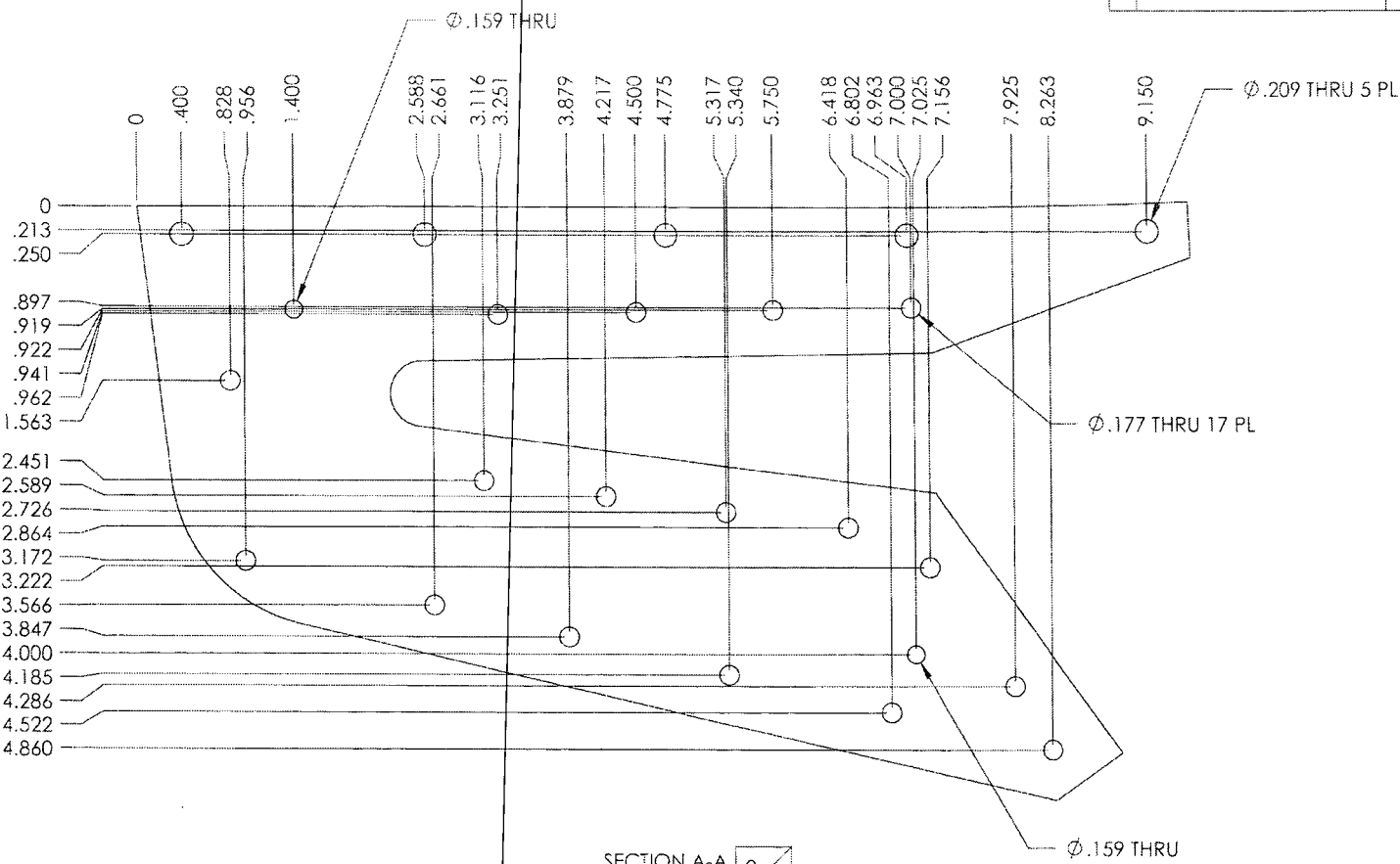




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REV	DESCRIPTION	DATE	APPROVED

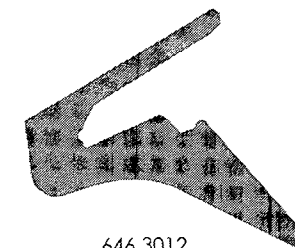
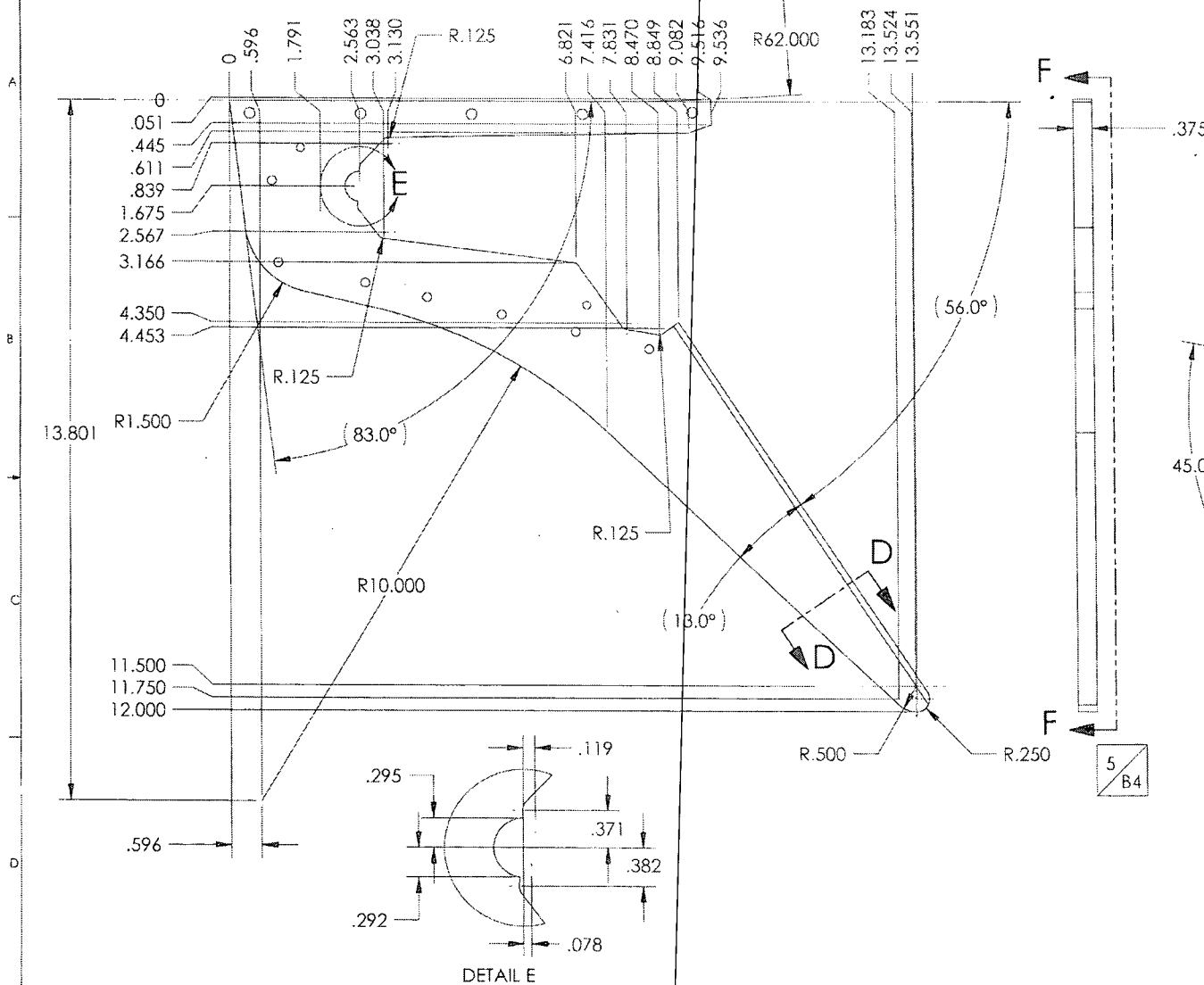
A  
B  
C  
D



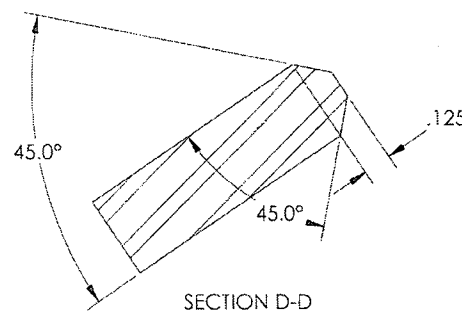
ORIGINAL DATE: 08/20/04 DRAWN BY: J. J. J. J. CHECKED BY: J. J. J. J. DESIGNED BY: J. J. J. J. APPROVED BY: J. J. J. J. PROJECT NO: 646.3000		<b>APICAL INDUSTRIES</b> 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760)724-5300	
SHEET: 3 OF 3		SCALE: NONE	

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REV	DESCRIPTION	DATE	BY



646.3012



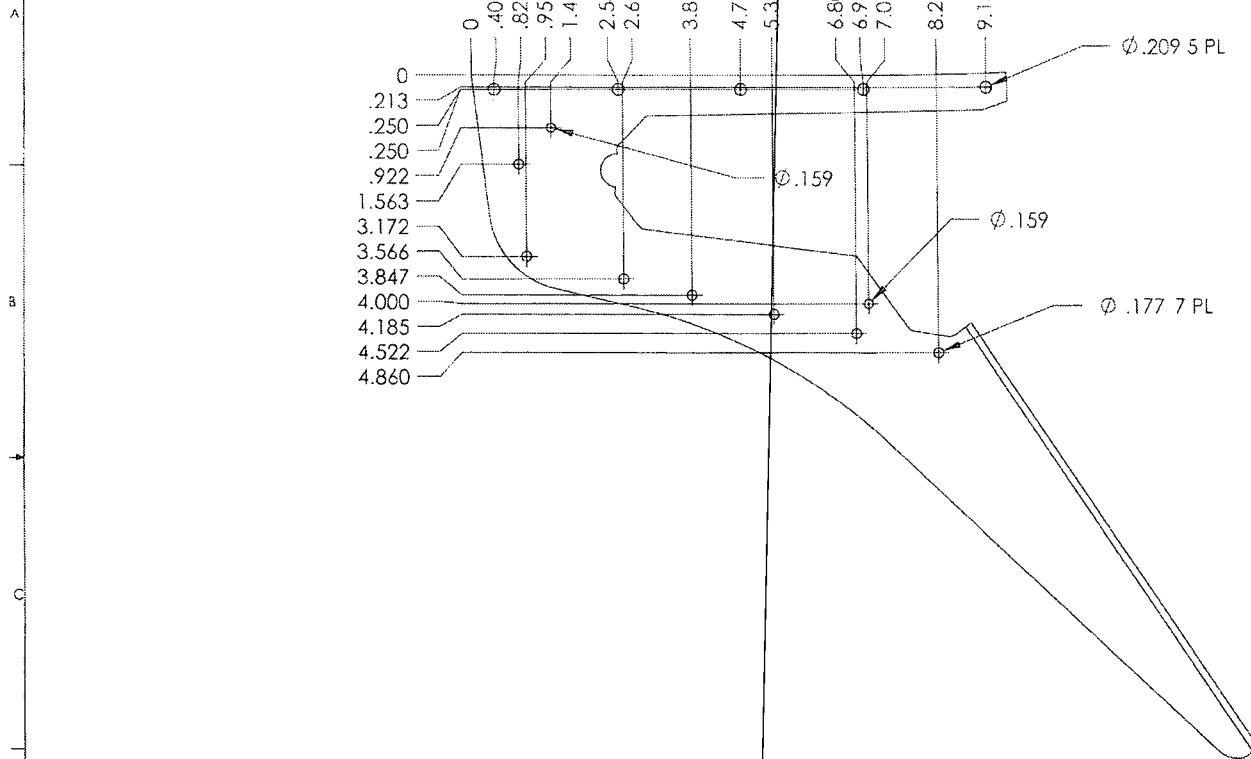
SECTION D-D

5  
B4

APICAL INDUSTRIES 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056-3512 (760)724-5300			
LOWER CUTTER ASSY			
DESIGNED BY: J. J. J. DRAWN BY: J. J. J. CHECKED BY: J. J. J. APPROVED BY: J. J. J. DATE: 10/1/88	SEE CHG. COPY 8 07M16	DWG. NO. 646.3000	PIV. N/C
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES DIMENSIONS ARE UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES	SCALE: NONE	SHEET: 4 OF 8	646.3000

THE INFORMATION CONTAINED IN THIS DRAWING IS THE SOLE PROPERTY OF  
APICAL INDUSTRIES AND IS TO BE USED ONLY IN CONNECTION WITH THE  
DESIGN AND CONSTRUCTION OF THE FACILITY DESCRIBED HEREIN.

REV	DESCRIPTION	DATE	APPROVED

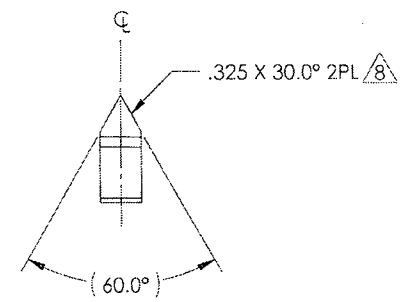
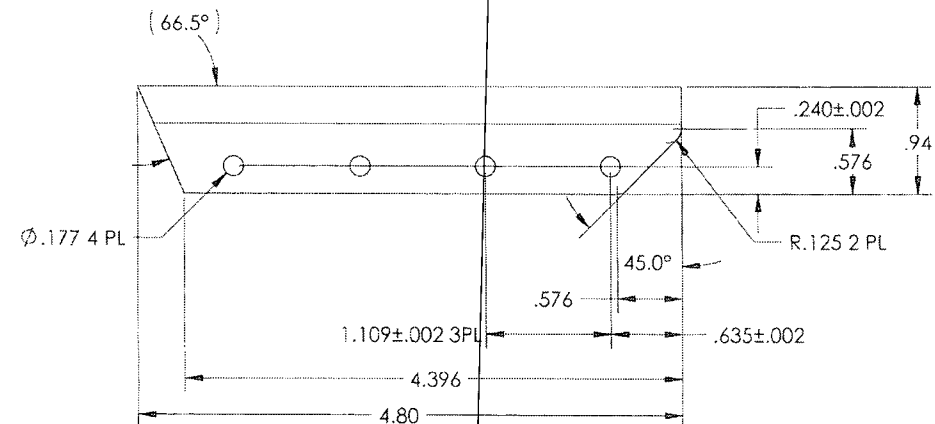
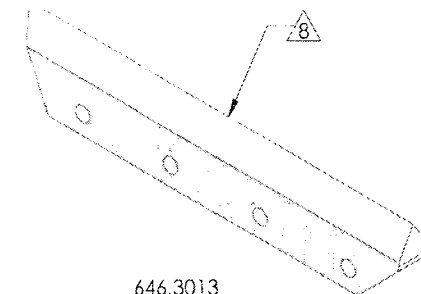


SECTION F-F 4 B6

ORIGINAL DATE DESIGNED BY DRAWN BY CHECKED BY APPROVED BY DATE COMMENTS	<b>APICAL INDUSTRIES</b> 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA 92058-3512 (760) 724-5300
(IF ANY) CONSPIRACY REPORTED DIMENSIONS IN INCHES TOLERANCES FINISHES MATERIALS SPECIALTIES	REV: 07/01/16 CAGE CODE: 646.3000 SCALE: NONE SHEET: 5 OF 8

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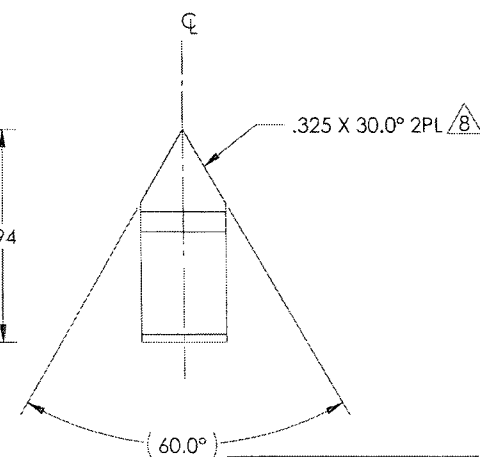
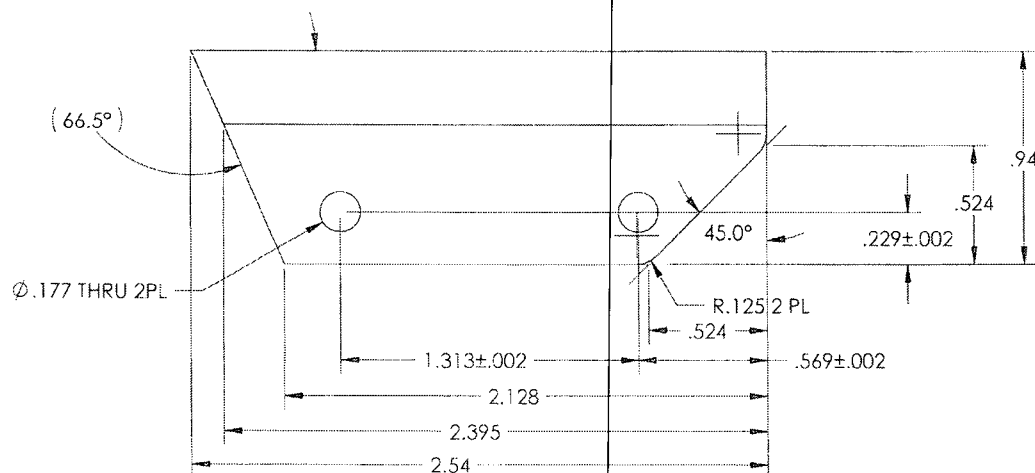
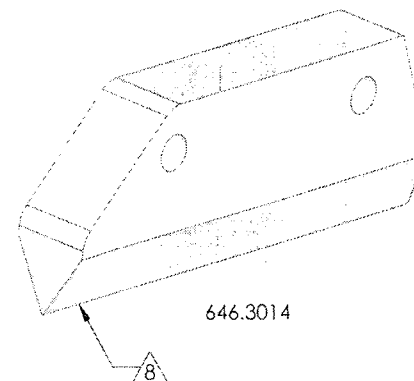
REV	DESCRIPTION	DATE	APPROVED



OPERATOR: J. J. J. DRAWING: 646.3000 DATE: 12/28/88 CHECKED: J. J. J. APPROVED: J. J. J. SCALE: NONE	<b>APICAL INDUSTRIES</b> 2608 ISLAND HEIGHTS DR. OCEANSIDE, CA 92056-3512 (760) 724-5300
PART: 646.3000 REV: B SCALE: NONE	LOWER CUTTER ASSY 646.3000 SHEET 6 OF 8

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REV	DESCRIPTION	DATE	APPROVED



APICAL INDUSTRIES  
2608 TEMPLE HEIGHTS DR.  
OCEANSIDE, CA. 92054-5512 (760) 724-5300

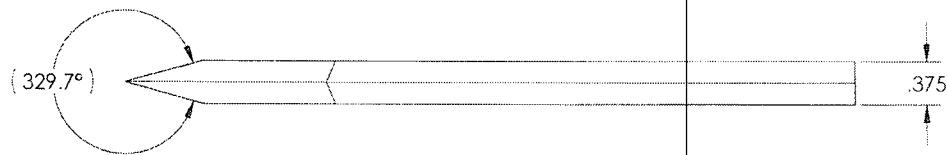
LOWER CUTTER ASSY

DATE: 07/21/16  
DRAWN BY: J. J. J. J.  
CHECKED BY: J. J. J. J.  
APPROVED BY: J. J. J. J.  
SCALE: NONE

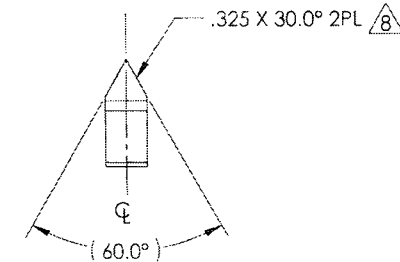
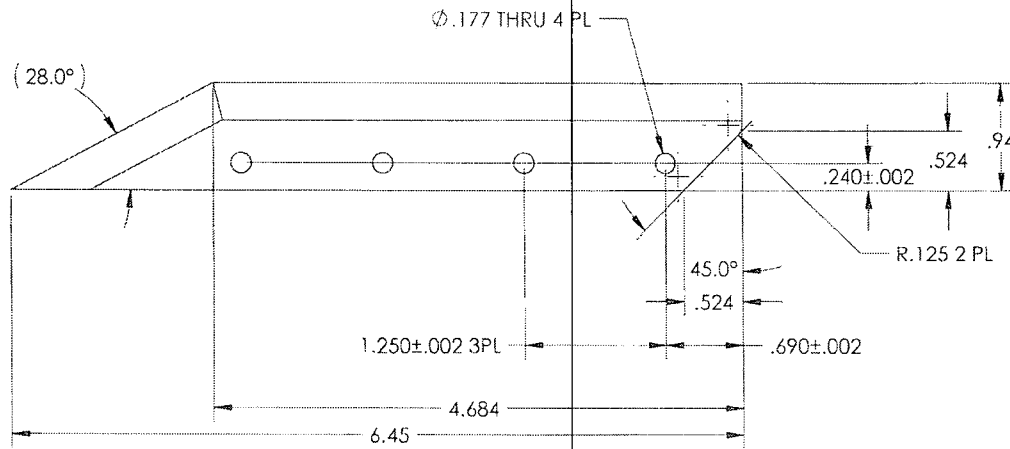
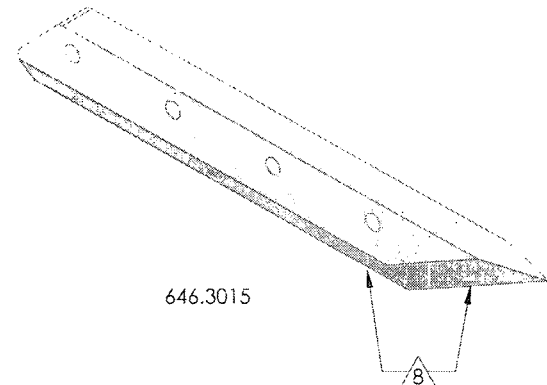
646.3000  
SHEET 7 OF 8

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REV	DESCRIPTION	DATE	APPROVED



646.3015



ORIGINAL DATE DESIGNED BY CHECKED BY F. WALSH DRAWING APPROVED T. J. JONES DATE APPROVAL NO.	APICAL INDUSTRIES 2608 TEMPLE HEIGHTS DR. OCEANSIDE, CA. 92056 3512 (760) 724-5300
UNLESS OTHERWISE SPECIFIED DIMENSIONS ARE IN INCHES TOLERANCES ARE: FRACTIONS DECIMALS 3 PLACES 2 PLACES ANGLES ± .5°	SCALE CODE 8 1/4" X 11" 646.3000 SCALE NONE
REV N/A	SHEET 8 OF 8